

PATRICK K.WONG Corporation Counsel

EDWARD S. KUSHI First Deputy

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### DEPARTMENT OF THE CORPORATION COUNSEL COUNTY OF MAUI 200 SOUTH HIGH STREET, 3<sup>RD</sup> FLOOR WAILUKU, MAUI, HAWAII 96793

EMAIL: CORPCOUN@MAUICOUNTY.GOV TELEPHONE: (808) 270-7740 FACSIMILE: (808) 270-7152

July 31, 2013

MEMO TO: G. Riki Hokama, Chair

Policy and Intergovernmental Affairs Committee

FROM: Moana M. Lutey, Deputy Corporation Counsel

SUBJECT: Litigation Matters (PIA-1)

Claim of Eric Stevenson, Claim No. 2012-1022-21

Date of Loss: 11/1/12

Our Department respectfully requests the opportunity to discuss the settlement of the above-referenced claim. There is no urgency in the scheduling of this matter.

It is anticipated that an executive session may be necessary to discuss questions and issues pertaining to the powers, duties, privileges, immunities, and liabilities of the County, the Council, and the Committee.

Copies of the claim and the proposed resolution are enclosed. Our department would also like to request that a representative of the Department of Environmental Management be present at the meeting to answer any questions that may arise.

Thank you for your anticipated assistance

MML:ma Enclosures

cc: Kyle Ginoza, Director of Environmental Management

RECEIVED

# Resolution

No.	

AUTHORIZING SETTLEMENT OF CLAIM NO.2012-1022-21 OF LIBERTY MUTUAL FIRE INSURANCE COMPANY ON BEHALF OF ITS INSURED, ERIC STEVENSON

WHEREAS, Eric Stevenson filed Claim No. 2012-1022-21 on February 8, 2013, against the County of Maui for damages caused to his parked vehicle at Kupuna Street, Kihei, on November 1, 2012, by a County refuse truck; and

WHEREAS, Eric Stevenson is insured for such damage by Liberty Mutual Fire Insurance Company; and

WHEREAS, Liberty Mutual Fire Insurance Company, as subrogee of this claim, has alleged that the County of Maui is liable for the expenses paid by Eric Stevenson and Liberty Mutual Fire Insurance Company; and

WHEREAS, the County of Maui, Eric Stevenson, and Liberty Mutual Fire Insurance Company, to avoid incurring expenses and the uncertainty of a judicial determination of the parties' respective rights and liabilities, have reached a proposed resolution of this claim by way of a negotiated settlement; and

WHEREAS, having reviewed the facts and circumstances regarding this matter and being advised of attempts to reach resolution of this claim by way of a negotiated settlement by the Department of the Corporation Counsel, the Council wishes to authorize settlement; now, therefore,

BE IT RESOLVED by the Council of the County of Maui:

Resolution	No.	

- 1. That it hereby approves settlement of Claim No. 2012-1022-21 in the amount of EIGHT THOUSAND THREE HUNDRED SEVENTY-ONE AND 82/100 DOLLARS (\$8,371.82); and
- 2. That payment is authorized to satisfy settlement of this claim following the execution of the "Release of Claim" by Eric Stevenson and Liberty Mutual Insurance; and
- 3. That certified copies of this Resolution be transmitted to the Mayor, the Director of Finance, the Director of Environmental Management, and the Corporation Counsel.

APPROVED AS TO FORM AND LEGALITY:

Deputy Corporation Counsel

County of Maui

S:\RISK MANAGEMENT\2 - GL Shared\Stevenson, Eric\RESO.wpd



### OFFICE OF THE COUNTY CLERK

COUNTY OF MAUI 200 SOUTH HIGH STREET WAILUKU, MAUI, HAWAII 96793 www.mauicounty.gov/county/clerk

February 15, 2013

AIMS 900 Fort Street Mall, Suite 1000 Honolulu, Hawaii 96813

Attn: Davina Kunimoto

**New Claims Assignment** 

Dear Ms. Kunimoto:

Respectfully transmitted is a copy of a claim against the County of Maui filed by Lynn Miller, of Liberty Mutual, on behalf of Eric Stevenson, which was received by our office on February 14, 2013.

Very truly yours

JEFFREY T. KUWADA

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County Clerk

Attachment

CC:

Mayor

Corporation Counsel

Council Chair

Department of Finance

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FEB 20 2013

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# **COUNTY OF MAUI**

# RECEIVED

CLAIM FOR DAMAGE OR INJURY

2013 FEB 14 PM 1: 56

	LEASE PRINT CLEARLY OFFICE OF THE
1.	Claimant: Mr. Mrs. Ms. Ms. County CLERK
	Address:
3.	Telephone No.: Business Residence
	Date of Accident: NOVEMBER 1, 2012
5.	Location of Accident: 198 KUPUNA ST KINEI HI 94753
6.	Amount of Claim: Property Damage \$ 862 .82 Personal Injury \$
7.	Describe the accident in detail. Indicate all the facts, causes, persons involved, witnesses, extent of damage, etc., and why you think the County is responsible. You may write on the back if needed.  Sanitation truck nit Liberty Mutual Insured,  Enc Stevenson's parked vehicle. The anver of the Sanitation truck was Williams Perreira.
	* Please see a Hached police report for more information
8.	If you carry insurance applicable to this claim, please provide the name and address of the insurance company and your policy number.  LIDEVILLE MUTUAL TIVE INSUVANCE COMPANY  5050 WTI ANMAN A SHE 200 Policy No. 025301973-01  A. Did you file a claim with your insurance company?  If yes, amount claimed \$ 8371.82 + Deductible amount \$ 250.00  STO21.87  B. If a claim was filed with your insurance company, what action do they intend to take?  SUDDIGHT AGAINST AT TOWN PARY'S INSURANCE
I	HEREBY DECLARE THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT.  2/8/13
	(Signature of Claimant) (Date)

(Rev. 05/11/95)

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Report Number:

12-050348

#### Narrative

#### ASSIGNMENT/ARRIVAL:

On 11/01/12 at 0703 hours, I was assigned to 198 Kupuna Street for a Motor Vehicle Accident type case. Dispatch related that a County Refuse Truck had hit a parked car.

I arrived at about 0710 hours and met with the driver of the Refuse Truck.

# INTERVIEW WITH DRIVER OF UNIT 1: /M/CAU/CIT

I interviewed on 11/01/12/ at about 0711 hours fronting 198 Kupuna Street. He related that as he was driving County refuse truck (CofM2438) and was attempting to execute a right hand turn onto Kupuna Street from Mahina Street and it was very difficult due to the number of cars parked on Kupuna Street.

related that he had to make a wide turn then cut it close to the north shoulder of Kupuna to avoid hitting the parked cars.

stated that he thought he had made the turn but he may have accidently hit or bumped the button to activate the garbage can arm. The arm caught the running board and under side of the parked blue Dodge (MMK658)

... stopped and parked his refuse truck and contacted Police to report the incident.

He also went to the residence of the owner, Eric STEVENSON, to inform him of the accident.

stated that he was not injured from the accident.

#### INTERVIEW WITH OWNER OF UNIT 2: Eric STEVENSON A/M/CAU/CIT

I interviewed STEVENSON on 11/1/12 at about 0715 hours. He related that he had left his truck bearing Hawaii license plates MMK658 parked on the shoulder of Kupuna Street fronting 198 on 10/31/12. He was awoken by the driver of the refuse truck this morning 11/1/12, who had informed him that he had hit the blue Dodge.

STEVENSON pointed out the damages on his truck that were not there before. There was damage to the running board and the lower driver`s side of the truck.

Nothing more to add.

#### INJURIES REPORTED/OBSERVED:

There were no injuries reported or observed.

### INVESTIGATION:

On 11/01/12 at about 0640 hours, was attempting to execute a right hand turn on Kupuna Street form Mahina Street. Due to the number of vehilces parked on the street it was a tight turn for his large refuse truck. He collided into a parked Dodge truck (MMK658) on Kupuna Street with the garbage picker arm. The owner of the Dodge, STEVENSON, was notified of the damages to his vehilce. There were no injuries reported and damages are estimated to be under \$3,000.00.

#### DISPOSITION:

Officer's Rank and Name	Officer's ID Number	Date/Time	Supervisor's Rank and Name	Supervisor's ID Number	Date/Time
PO2 STICE, BRIANNA M	15171	11/3/12 08:13	SGTD6 DUCHANE, ROGER A	297	11/3/12 08:13



Liberty Mutual Group

5050 West Tilghman Street, Ste 200

Allentown, PA 18104 Tel: (800) 521-0986 Fax: (603) 334-0372

ATTN:

Office of the County Clerk

County of Maui

Fax:

200 South High Street Room 708

Email: Wailuku HI 96793

Date:

February 8, 2013

Our Claim Number:

025301973-0001

023301973-000

Our Insured: Date of Loss: Eric Stevenson

November 1, 2012

Your Claim

Number:

Your Insured:

Department of Environ Memt

NOTE: PLEASE SCROLL ALL THE WAY DOWN TO VIEW ENCLOSED PROOFS.

Based on our investigation of this accident/loss, we believe your Insured to be responsible for our Insured's damage.

Please see the enclosed Subrogation Demand in the amount of \$8621.82

If liability is pending, please provide the status of your investigation and the timeframe in which you anticipate your investigation will be completed.

Payment should be sent to Liberty Mutual Insurance 5050 West Tilghman St, Suite 200, Allentown, PA 18104-9915

Property Damages:

\$ 8371.82

Deductible:

250.00

Rental:

\$ \$

Total Amount Due:

\$ 8,621.82

Insured's Out of Pocket (if known) \$

rental

Please include our claim number on your check for the total amount of damages above and send your payment to my attention. Please deal directly with our insured to discuss any out of pocket expenses they may have incurred. Payment of out of pocket expenses should be made directly to our insured.

If you have any questions, please contact me at the telephone number above on extension 73544 When communicating by email, please be sure to include our claim number in the subject line.

Thank you,

Lynn Miller .

Recovery Team

Subrogation Department

Lynn.Miller@libertymutual.com

RECEIVEL

FIB 20 2013

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Enclosures

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Claimant

Date of Loss

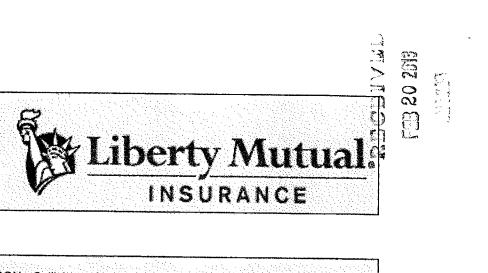
**ERIC STEVENSON** 

Insured

ERIC STEVENSON

Claim

025301973 11/01/2012



Reserve		SON - Collision - Non-Medical Loss

Payee	Check #	Issued Date	Amount Paid
ERIC STEVENSON	31001584	01/22/2013	\$8,371.82
Total			\$8,371.82

Grand Total	
Grand Total	የር ባንፈ በር ነ
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